£		PART B	- FEE(S)	TRANSMITTAL			
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7590 06/06/2005			•	papers. Each additiona	al paper, such as an assignm e of mailing or transmission.	ent or formal drawing, must	
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Eastman Kodak Company I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envel addressed to the Mail Stop ISSUE FEE address above, or being facsin transmitted to the USPTO (703) 746-4000, on the date indicated below.							
08/30/2005 SFELEKE2 0000	0020 09685112			Ju	ne & Carta	(Depositor's name)	
1 FC:1501 1400.00 DP				Jun (quet 3,28	(Signature) (Date)	
APPLICATION NO.	FILING DATE	FIRST NAMED INVEN		O INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/685,112 10/10/2000 Henry Lieberman 81055DMW De 4920						2 4920	
TITLE OF INVENTION: AGENT FOR INTEGRATED ANNOTATION AND RETRIEVAL OF IMAGES							
	DALL DITTO	LOGILE FEE		NUM IOATION FEE	TOTAL PER(C) DUE	DATE DUE	
APPLN. TYPE	SMALL ENTITY	ISSUE F		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	nonprovisional NO		,	\$0	\$1400	09/06/2005	
EXAMINER		ART UNIT		CLASS-SUBCLASS			
LUDWIG, MATTHEW J		2178		707-512000			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
	RESIDENCE DATA TO B	E PRINTED ON T	THE PATENT	(print or type)			
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) EASTMAN XODAK COMPANY							
	REE T, ROCHESTI	ER, NY 146	50-2201	,			
Please check the appropriate	assignee category or category	ries (will not be pr	inted on the p	atent): 🗖 Individual 🛱 C	orporation or other private gr	roup entity Government	
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a. Applicant claims S	(from status indicated above MALL ENTITY status. See 3	37 CFR 1.27.		ant is no longer claiming SMA			
The Director of the USPTO NOTE: The Issue Fee and P interest as shown by the reco	is requested to apply the Issu ublication Fee (if required) words of the United States Pate	e Fee and Publica vill not be accepted int and Trademark	tion Fee (if an d from anyone Office.	y) or to re-apply any previousle other than the applicant; a reg	y paid issue fee to the applic istered attorney or agent; or	ation identified above. the assignee or other party in	
Authorized Signature Peul G. Larpold/1PC Date 8-22-05							
Authorized Signature + Cul 4. Leipsld/1PC Date 8-22-05 Typed or printed name + Cul A. Leipsld Registration No. 26,664							

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